TOWN OF SMITHFIELD

310 Institute Street, P. O. Box 246, Smithfield, VA 23431 (757) 365-4200 - Fax (757) 365-0215

SIGN PERMIT APPLICATION

PERMIT TO ALTER, ERECT, DEMOLISH, MOVE, REPAINT, OR REPLACE A SIGN

| Tax Number | | Permit Number | |
|---|---|---|--|
| Date of Application: | | Zoning: | |
| Sign Address: | | | |
| Sign Owner: | | Phone: | |
| Sign Owner Address: | | | |
| Contractor Name: | Pl | hone: | |
| Contractor Address: | | | |
| EXIS | STING SIGN INVEN | TORY | |
| | | | |
| Type of Sign | Sign Dimensions | Sign Area (SQ. FT.) | |
| | | | |
| | | | |
| | PROPOSED SIGN | | |
| Are you replacing an existing sign? (Circl | le One) YES NO | | |
| Proposed Type: | | Dimensions (Feet): | |
| | | | |
| Height: | | otal Square Feet: | |
| Distance From Property Lines: From | | - | |
| Distance From Froperty Lines. 11011 | 51 | ide | |
| | rea dimensions, location, means o nit is issued. ecured from Isle of Wight County | required for all signs and shall include the f support, method of illumination, colors, Building Inspections (365-6213). | |
| hereby certify that I have the authority the construction will conform with the res | | t, that the information is correct, and that e of the Town of Smithfield. | |
| Signature: | | Date: | |
| Print Name: | | Phone: | |
| Address: | | | |
| PLANNIN BHAR Review Required? YES | G AND ZONING DEPARTMENT NO | T USE ONLY | |
| APPROVED: | DISAPPRO | DISAPPROVED: | |
| INSPECTOR: | DATE ISSUED: | | |
| | | | |